

**CHAPTER 13 PLAN
UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF MISSISSIPPI**

Debtor: Edward L. Adams, Jr. SSN: xxx-xx-4356 CASE NO: _____
 Joint Debtor: Joan M. Adams SSN: xxx-xx-8771 Median Income: ☐ Above ☒ Below
 Address: 64 Lang Dr.
Picayune, MS 39466

THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed. The treatment of ALL secured and priority debts must be provided for in this plan.

PAYMENT AND LENGTH OF PLAN

The plan period shall be for a period of 60 months, not to be less than 36 months for below median income debtor(s), or less than 60 months for above median income debtor(s).

- (A) Debtor shall pay \$ 1,787.00 (☒ monthly, ☐ semi-monthly, ☐ weekly, or ☐ bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

DIRECT -TFS

- (B) Joint Debtor shall pay \$ _____ (☐ monthly, ☐ semi-monthly, ☐ weekly, or ☐ bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

PRIORITY CREDITORS.

Filed claims which are not disallowed are to be paid in full or as ordered by the Court as follows:

Internal Revenue Service: \$ _____ at \$ _____/month
 MS Dept. of Revenue: \$ 849.00 at \$ 14.00 /month
 Other/ _____ \$ _____ at \$ _____/month

DOMESTIC SUPPORT OBLIGATION. DUE TO: _____

POST PETITION OBLIGATION: In the amount of \$ _____ per month beginning _____
 To be paid ☐ direct, ☐ through payroll deduction, or ☐ through the plan.

PRE-PETITION ARREARAGE: In the amount of \$ _____ through _____ which shall
 Be paid in the amount of \$ _____ per month beginning _____.
 To be paid ☐ direct, ☐ through payroll deduction, or ☐ through the plan.

Debtor's Initials _____ Joint Debtor's Initials _____ Chapter 13 Plan, Page _____ of _____

HOME MORTGAGES. All claims secured by real property which are to be paid through the plan shall be schedules below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed herein, subject to the start date for the continuing monthly mortgage payment proposed herein.

Mtg pmts to Vanderbilt Mort Beginning May, 2016 @ \$ 538.00 ☒ Plan ☐ Direct
 Mtg pmts to _____ Beginning _____ @ \$ _____ ☐ Plan ☐ Direct
 Mtg pmts to _____ Beginning _____ @ \$ _____ ☐ Plan ☐ Direct

Mtg arrears to Vanderbilt Mortgage through April, 2016 \$ 3,000.00 @ \$ 50.00 /mo
 Mtg arrears to _____ through _____ \$ _____ @ \$ _____ /mo
 Mtg arrears to _____ through _____ \$ _____ @ \$ _____ /mo

MORTGAGE CLAIMS TO BE PAID IN FULL OVER PLAN TERM:

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
 Property Address: _____ Are related taxes and/or insurance escrowed ☐ Yes No

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
 Property Address: _____ Are related taxes and/or insurance escrowed ☐ Yes ☐ No

NON-MORTGAGE SECURED CLAIMS. Creditors that have filed claims that are not disallowed are to retain lien(s) pursuant to 11 U.S.C. § 1325(a)(5)(B)(I) until the payment of the debt determined as under non-bankruptcy law or discharge. Such creditors shall be paid as secured claimants the sum set out below or pursuant to other order of the Court. The portion of the claim not paid as secured shall be treated as a general unsecured claim.

CREDITOR'S NAME	COLLATERAL	910* CLM	APPROX. AMT. OWED	VALUE	INT. RATE	PAY VALUE AMT. OWED
Ford Motor	11 Ford	yes	15,795.00	7,512.00	5%	Pay Value
Ford Motor	11Ford F150	yes	25,706.00	16,253.00	5%	Pay Value
Capital One	06 Honda	yes	2,784.00	2,403.00	5%	Pay Value
Wells Fargo	11 Toyota	yes	9,799.00	5,000.00	5%	Pay Value

*The column for "910 Clm" applies to both motor vehicles and "any other thing of value" as used in the "hanging paragraph of 11 U.S.C. § 1325

SPECIAL CLAIMANTS including, but not limited to, co-signed debts, abandonment of collateral, direct payments by Debtor, etc. For all abandoned collateral Debtor will pay \$0.00 on the second portion of the debt. Where the proposal is for payment, creditor must file a proof of claim to receive proposed payment.

CREDITOR'S NAME	COLLATERAL	APPROX. AMT. OWED	PROPOSED TREATMENT
Yamaha	ATV	8,642.00	Surrender to Co- Debtor
1 st Franklin	HHG	1,389.00	Surrender property treat as unsecured
1 st Heritage Credit	HHG	3,739.00	Surrender property treat as unsecured
Advantage Financial	HHG	769.00	Surrender property treat as unsecured
Harrison Finance	HHG	1,458.00	Surrender property treat as unsecured
Republic Finance	HHG	5,352.00	Surrender property treat as unsecured

Debtor's Initials _____ Joint Debtor's Initials _____ Chapter 13 Plan, Page _____ of _____

STUDENT LOANS which are not subject to discharge pursuant to 11 U.S.C. § 523(a)(8) and 1328(c) are as follows (such debts shall not be included in the general unsecured total)
CREDITOR'S NAME APPROX AMT OWED CONTRACTUAL MO PMT PROPOSED TREATMENT

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SPECIAL PROVISIONS which may apply to any or all payments to be paid through the plan, including, but not limited to, adequate protection payments:

GENERAL UNSECURED CLAIMS total approximately \$ 26,424.00 . Such claims must be *timely filed* and not disallowed to receive payment as follows: _____ IN FULL (100%), 8 % (percent) MINIMUM, or a total distribution of \$ _____, with the Trustee to determine the percentage distribution. *Those general unsecured claims not timely filed shall be paid nothing, absent order of the Court.*

Total attorney fee charged:	\$ 3,200.00
Attorney fee previously paid:	\$ 1,690.00
Attorney fee to be paid in plan:	\$ 1,510.00

The payment of administrative costs and aforementioned attorney fees are paid pursuant to Court order and/or local rules.

Automobile Insurance Co/Agent	Attorney for Debtor (name/address/phone/email)
_____	<u>Jason Graeber</u>
_____	<u>2462 Pass Rd.</u>
_____	<u>Biloxi, MS 39531</u>

Telephone/Fax: _____	Telephone No: <u>228-207-7117</u>
	Facsimile No: <u>228-207-8634</u>
	Email address: <u>jason@jasongraeberlaw.com</u>

DATED: <u>4/29/2016</u>	DEBTOR'S SIGNATURE <u>/s/Edward L. Adams, Jr.</u>
	JOINT DEBTOR'S SIGNATURE <u>/s/Joan M. Adams</u>
	ATTORNEY'S SIGNATURE <u>/s/Jason Graeber</u>